Oct 15 2009 13:12

## Case 1:04-cv-04241-JG Document 69 Filed 11/25/09 Page 1 of 1 PageID #: 926

24 AUTHORIZATION AND VOUCH	ER FOR PAYMENT OF TRANSCE		- l voi	CHER NUMB	EX //	
R/DIST./DIV. CODE 2. PERS	ON REPRESENTED Racky Ran	ochair	102	ט <i>טטו</i> ווו	OV4 OTHER DKT. NUM	DFD
IAG. DKT/DEF. NUMBER	4, DIST. DKT/DEF. NUMB 04-CV-4241	ER 5. Al	PPEALS DKT/DEF. N			
CASE/MATTER OF (Case Name)	8. PAYMENT CATEGORY	9. T	YPE PERSON REPRI	SENTED 1	O. REPRESENTATIO	ON TYPE
cky Ramchair	Other		Adult Defend		HC	
Way OFFENSE(S) CHARGED (Cite U	S. Code, Title & Section) If m	ore than one offen	se, list (up to five) major	r offenses charge	d, according to severity	of offense.
SEPERIORIO) CALLACTE ( SAN TERMINA	1			· Land Market		
Alang Talang Talan	REQUEST AND	AUTHORIZ	ATION FOR TRA	ANSCRIPT F	LED	
PROCEEDING IN WHICH TRA	inscript is to be used of	Describe briefly)		IN CLEF	K'S OFFICE	
Habaees Corpus Petition			<u>U.</u>	S DISTRIC	T COURT F.D.N	Y
PROCEEDING TO BE TRANSCRIBE Statement, defense argument, pros	D (Describe specifically) NOT	E: The trial transc Instructions, unic	ripts are not to include as specifically authoriz	prosecution ope ed by the Gours (	of Egono	. vpc
siatement, dejense argument, prosi Hoaring	ECHINAL	•		1101	0.3.2009	*
Lighting		· · · · · · · · · · · · · · · · · · ·			1	LAITTINE STEE
SPECIAL AUTHORIZATIONS (	Services Other Than Ordinary)				AND OF FICE	7
A: Appartieued Cost 0.5	5000 % of transcript with	(Give case name w		York State Att		6
	xpedited Daily	Hourly Trausc		ne Unedited Tra	nscript	
C Prosecution Opening	Statement Prosecution		Prosecution Rebutts Voir Dire	il 🔲 Jery le:	structions	
Defense Opening St	itement Delense A	transcripts will im				
D. In this multi-derendant c transcript services to persons	proceeding under the Criminal					
ATTORNEY'S STATEMENT		1 1	6. COURT ORDER	m nerson rentelen	ted baving barn ostablis	hed to the Court's
the attorney for the person represent to transcript requested is necessary	sed who is massed above, I weren;	i dierefore. 1 s	atisfaction, the authoriz	ation requested in	Item 15 is bereby gram	reu.
se transcript requested is necessary quest authorization to obtain the traces pursuant to the Criminal Jast	rangeript services at the expense of	of the United				
tates pursuant to the Criminal Justi	ce Act	1	X( /			
2 2 6 1 mm a 2		/ _ 1	X II / I			
Lille	10/1	1/15	$-\lambda X$	<u>e</u>		the Count
Alex	10/)	1/05	Signature of Pre	siding Judicial C	officer or by Order of t	the Court
Signature of Assuracy	) / //) L	1/ v 5				
Signature of Attorway Frank Handelma	an	1/15 nte	Signature of Pre		Officer or by Order of the Nume Pro I	
Signature of Attorway Frank Handelma	an 47/-67	1/ v 5 239	Date of Ord	er ((	Nunc Pro T	
Signature of Attorney Frank Handelm: Printed Name	an 47/-67	1/ v 5 239	Date of Ord	er ((	Nunc Pro T	unc Date
Signature of Attorney Frank Handelm: Primed Name Telephone Number: (212  X Panel Attorney Ressined A	an  2 2 30 47/-67  Marriety Pro-Se Lega	ale 239 al Organization	SERVICES	er //	Nume Pro I	unc Date
Signature of Attorney Frank Handelm: Printed Name Telephone Number: (212  X Panel Attorney Ressined A	an  2 2 30 47/-67  Marriety Pro-Se Lega	ale 239 al Organization	SERVICES 18. PAYER'S NAME (FI	er //	Nume Pro I	unc Data
Signature of Attorney Frank Handelm Printed Name Telephone Number: (212)  Panel Attorney   Remined Attorney	an  2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ale  239  Organization  CLAIM FOR	SERVICES 18. PAYER'S NAME (FI MAILING ADDRES ANTHONY D	rsi Name, M.I., I	Nume Pro I	unc Date  ny suffec), AND
Signature of Attorney  Frank Handelm:  Primed Name  Telephone Number: (212  X Panel Attorney Resained A	an  2 7/-67  Sturdey   Pro-Se   Lega  SER STATUS  Transcriber   Other	ule  238 al Organization  CLAIM FOR	SERVICES 18. PAYER'S NAME (FI MAILING ADDRES ANTHONY D 225 Cadman	rsi Name, M.I., I S D. FRISOLON Plaza East	Nume Pro I	unc Date  ny suffec), AND
Signature of Attorney  Frank Handelm:  Primed Name  Telephone Number: (212  X Panel Attorney Resained A	an  2 7/-67  Sturdey   Pro-Se   Lega  SER STATUS  Transcriber   Other	ule  238 al Organization  CLAIM FOR	SERVICES  18. PAYEE'S NAME (FI MAILING ADDRES ANTHONY D 225 Cadman Room 118 N Brooklyn, NY	rsi Name, M.I., I. b. FRISOLON Plaza East orth 11201	ast Name, Including an	ny suffec), AND
Signature of Attorney Frank Handelm: Printed Name Telephone Number: (212  Panel Attorney Ressined A	an  2 7/-67  Sturdey   Pro-Se   Lega  SER STATUS  Transcriber   Other	ule  239 al Organization  CLAIM FOR	SERVICES  18. PAYEE'S NAME (FI MAILING ADDRES ANTHONY D 225 Cadman Room 118 N Brooklyn, NY	rsi Name, M.I., I S D. FRISOLON Plaza East orth	Aust Name, Including an NE, CSR RDR CF	ty suffic), AND
Signature of Attorney Frank Handelm: Printed Name Telephone Number: (212  Printed Attorney Retained A  7. COURT REPORTER/TRANSCRIE    Official Contract     Social Security Number Of	an    2	ule  239 al Organization  CLAIM FOR	SERVICES  18. PAYEE'S NAME (FI MAILING ADDRES ANTHONY D 225 Cadman Room 118 N Brooklyn, NY	rsi Name, M.I., I. b. FRISOLON Plaza East orth 11201	ast Name, Including an	ty suffec), AND RR 2487 TOTAL
Signature of Attorney Frank Handelm Printed Name Telephone Number: (212)  Proced Attorney Received Attorney Contract  Tofficial Contract  Sofficial Contract  The Social Security Number of	an    2   2   2   2   2   2   2   2   2	abe  239 at Organization  CLAIM FOR	R SERVICES  18. PAYEE'S NAME (FI MAILING ADDRES ANTHONY D 225 Cadman Room 118 N Brooklyn, NY  RATE PER PAGE  5.34	rst Name, M.I., I.S. FRISOLO? Plaza East orth '11201 [elephone Num SUB-TOTAL 384.48	ass Name, including and NE, CSR RDR CF	ty suffec), AND RR  2487 TOTAL 192.24
Signature of Attorney Frank Handelm: Printed Name Telephone Number: (212    Panel Attorney   Retained A	Describer Other REMPLOYER ID NUMBER OF P	Organization  CLAIM FOR  AYEE  NO. OF PAGES	SERVICES  18. PAYEE'S NAME (FI MAILING ADDRES  ANTHONY D 225 Cadman Room 118 N Brooklyn, NY	rsi Name, M.I., I S FRISOLON Plaza East orth 11201 (elephone Num SUB-TOTAL	Ass AMOUNT APPORTIONED	ty suffec), AND RR 2487 TOTAL
Signature of Attorney Frank Handelm: Printed Name Telephone Number: (212    Pawel Attorney   Retained A   Ret	An De	Organization CLAIM FOR AYEE  NO. OF PAGES 72	R SERVICES  18. PAYEE'S NAME (FI MAILING ADDRES ANTHONY D 225 Cadman Room 118 N Brooklyn, NY  RATE PER PAGE  5.34	rst Name, M.I., I.S. FRISOLO? Plaza East orth '11201 [elephone Num SUB-TOTAL 384.48	Ass AMOUNT APPORTIONED	ty suffec), AND RR  2487 TOTAL 192.24
Signature of Attorney Frank Handelm: Primed Name Telephone Number: (212  Telephone Number: (212  Tourney Remined A  Tourney Court Reporter/Transcript  Official Contract  Tourney Number of  Transcript  Original	An De	Organization CLAIM FOR AYEE  NO. OF PAGES 72	R SERVICES 18. PAYEE'S NAME (FI MAILING ADDRES ANTHONY D 225 Cadman Room 118 N Brooklyn, NY RATE PER PAGE 5.34 0.90	rsi Name, M.I., I S FRISOLON Plaza East orth 11201 (elephone Num SUB-TOTAL 384.48 64.80	Assi Name, including an NE, CSR RDR CF aber: (718) 613- LESS AMOUNT APPORTIONED 0.50000	TOTAL 192.24 64.80
Signature of Attorney Frank Handelm: Printed Name Telephone Number: (212    Panel Attorney   Remined A   Remined A	An Determine Det	NO. OF PAGES 72 72	R SERVICES  18. PAYEE'S NAME (FI MAILING ADDRES ANTHONY D 225 Cadman Room 118 N Brooklyn, NY  RATE PER PAGE  5.34  0.90	rst Name, M.I., I. S. PRISOLON Plaza East orth '11201 (elephone Num SUB-TOTAL 384.48 64.80	Number Pro II  And Name, Including an NE, CSR RDR CF  There: (718) 613-  LESS AMOUNT APPORTIONED  0.50000	TOTAL 192.24 64.80
Signature of Attorney Frank Handelm Printed Name Telephone Number: (212    Panel Attorney   Remined A  17. COURT REPORTER/TRANSCRIP   Official   Contract     Official   Contr	An Determine Det	NO. OF PAGES 72 72	R SERVICES  18. PAYEE'S NAME (FI MAILING ADDRES ANTHONY D 225 Cadman Room 118 N Brooklyn, NY  RATE PER PAGE  5.34  0.90	rst Name, M.I., I. S. PRISOLON Plaza East orth '11201 (elephone Num SUB-TOTAL 384.48 64.80	Number Pro II  And Name, Including an NE, CSR RDR CF  There: (718) 613-  LESS AMOUNT APPORTIONED  0.50000	TOTAL 192.24 64.80
Signature of Attorney Frank Handelm: Printed Name Telephone Number: (212    Panel Attorney   Remined A   Remined A     Court reporter/transcrie   Official   Contract     Official   Contract     Official   Contract     Official   Contract     Official   Contract     Social Security Number of Contract     Official   Contract     Expenses (Hemize)	An Detection   Det	NO. OF PAGES 72 72	R SERVICES  18. PAYEE'S NAME (FI MAILING ADDRES ANTHONY D 225 Cadman Room 118 N Brooklyn, NY  RATE PER PAGE  5.34  0.90	rst Name, M.I., I. S. D. FRISOLON Plaza East orth (11201 [clephone Num SUB-TOTAL 384.48 64.80	Assi Name, including an NE, CSR RDR CF  TO LESS AMOUNT APPORTIONED  0.50000  OCT CLAIMED:	TOTAL 192.24 64.80
Signature of Attorney Frank Handelm: Printed Name Telephone Number: (212  Panel Attorney Remined A  17. COURT REPORTER/TRANSCRIP  19. SOCIAL SECURITY NUMBER OF  20. TRANSCRIPT Original 1st Copy Expenses (Remice)  21. CLAIMAINT'S CERTIFICATION I hereby cartify that the above et other source for these services.	AND DATE OF SERVICE PROVIDED SIZE IN CITY OF SERVICE PROVIDED SIZE IS for services readered and is created and	NO. OF PAGES 72 72	R SERVICES  18. PAYEE'S NAME (FI MAILING ADDRES ANTHONY D 225 Cadman Room 118 N Brooklyn, NY  RATE PER PAGE  5.34  0.90  TO	rst Name, M.I., I. S. PRISOLON Plaza East orth 11201 [elephone Num 384.48 64.80  TAL AMOUN sayment (compen	Number Pro II  And Name, Including an NE, CSR RDR CF  There: (718) 613-  LESS AMOUNT APPORTIONED  0.50000	Ty SH(fbc), AND RR  2487 TOTAL 192.24 64.80
Signature of Attorway Frank Handelma Printed Name Telephone Number: (212  Proved Attorney Received A  17. COURT REPORTER/TRANSCRIF  19. SOCIAL SECURITY NUMBER OF  20. TRANSCRIFT Original 1st Copy Expenses (Hemice)  21. CLAIMAINT'S CERTIFICATION I hereby certify that the above et other source for these services.  Signature of Claimant/Payments	AND DATE OF SERVICE PROVIDED aim is for services rendered and is cut	NO. OF PAGES 72 72 72	R SERVICES  18. PAYEE'S NAME (FI MAILING ADDRES ANTHONY D 225 Cadman ROOM 118 N Brooklyn, NY  RATE PER PAGE  5.34  0.90  TO  TO TO THE ROOM OF TREE PER PAGE  TO THE PER PA	rst Name, M.I., I. S. Plaza East orth 11201 [elephone Num SUB-TOTAL 384.48 64.80  TAL AMOUN	Assi Name, including an NE, CSR RDR CF  TO LESS AMOUNT APPORTIONED  0.50000  OCCUPATION OF THE PROPERTY OF VALUE AND	Ty SH(fbc), AND RR  2487 TOTAL 192.24 64.80
Signature of Attorney Frank Handelm: Printed Name Telephone Number: (212    Panel Attorney   Remined A   Remined A   Court reporter/transcript   Official   Contract     Official   Contract     Official   Contract     Official   Contract     Official   Contract     Social Security Number of   19. Social Security Number of   Panel Attorney     Contract   Contract     Contract   Contract	AND DATE OF SERVICE PROVIDED aim is for services rendered and is cut	NO. OF PAGES 72 72 72	R SERVICES  18. PAYEE'S NAME (FI MAILING ADDRES ANTHONY D 225 Cadman ROOM 118 N Brooklyn, NY  RATE PER PAGE  5.34  0.90  TO  TO TO THE ROOM OF TREE PER PAGE  TO THE PER PA	rst Name, M.I., I. S. Plaza East orth 11201 [elephone Num SUB-TOTAL 384.48 64.80  TAL AMOUN	Assi Name, including an NE, CSR RDR CF  TO LESS AMOUNT APPORTIONED  0.50000  OCCUPATION OF THE PROPERTY OF VALUE AND	Ty SH(fbc), AND RR  2487 TOTAL 192.24 64.80
Signature of Attorney Frank Handelm Printed Name Telephone Number: (212)    Panel Attorney   Ressined A   Ressined A     Court Reporter/Transcript   Official   Contract     O	ACCUMENT OF SERVICES PROVIDED SIZE STATUS  INCLUDE PAGE NUMBERS  1 to 72  1 to 72  1 to 72  NOT SERVICES readered and is continued in the services readered and in the services readered and is continued in the services readered and in the services r	NO. OF PAGES 72 72 72	R SERVICES  18. PAYEE'S NAME (FI MAILING ADDRES ANTHONY D 225 Cadman ROOM 118 N Brooklyn, NY  RATE PER PAGE  5.34  0.90  TO  TO TO THE ROOM OF TREE PER PAGE  TO THE PER PA	rst Name, M.I., I. S. Plaza East orth 11201 [elephone Num SUB-TOTAL 384.48 64.80  TAL AMOUN	Assi Name, including an NE, CSR RDR CF  TO LESS AMOUNT APPORTIONED  0.50000  OCCUPATION OF THE PROPERTY OF VALUE AND	Ty SH(FE), AND RR  2487 TOTAL 192.24 64.80
Signature of Attorney Frank Handelma Printed Name Telephone Number: (212    Pauel Attorney   Remined A   Remined A	ATTEMPT OF SERVICE PROVIDED  ATTEMPT OF SERVI	NO. OF PAGES 72 72 72 TTORNEY are the services were	R SERVICES  18. PAYEE'S NAME (FI MAILING ADDRES ANTHONY D 225 Cadman Room 118 N Brooklyn, NY  RATE PER PAGE  5.34 0.90  TO the not sought or received go the not sought or received go TO TERTIFICATION TENDERED	rst Name, M.I., I. S. PRISOLO! Plaza East orth 11201 [elephone Num SUB-TOTAL 384.48 64.80  TAL AMOUN sayment (compen	Auto Pro II  Auto	Ty SH(FEC), AND RR  2487 TOTAL 192.24 64.80 257.04
Signature of Attorney Frank Handelma Printed Name Telephone Number: (212    Proced Attorney   Restined A   Re	ATTEMPT OF SERVICE PROVIDED  ATTEMPT OF SERVI	NO. OF PAGES 72 72 72 TTORNEY are the services were	R SERVICES  18. PAYEE'S NAME (FI MAILING ADDRES ANTHONY D 225 Cadman ROOM 118 N Brooklyn, NY  RATE PER PAGE  5.34  0.90  TO  TO TO THE ROOM OF TREE PER PAGE  TO THE PER PA	rst Name, M.I., I. S. PRISOLO! Plaza East orth 11201 [elephone Num SUB-TOTAL 384.48 64.80  TAL AMOUN sayment (compen	Auto Pro II  Auto	TY SHIFTE), AND RR 2487 TOTAL 192.24 64.80 257.04
Signature of Attorney Frank Handelm: Printed Name Telephone Number: (212    Pauel Attorney   Remined A   Remined A	ATTEMPT OF SERVICE PROVIDED  ATTEMPT OF SERVI	NO. OF PAGES 72 72 72 TTORNEY are the services were	R SERVICES  18. PAYEE'S NAME (FI MAILING ADDRES ANTHONY D 225 Cadman Room 118 N Brooklyn, NY  RATE PER PAGE  5.34 0.90  TO the not sought or received go the not sought or received go TO TERTIFICATION TENDERED	rst Name, M.I., I. S. PRISOLO! Plaza East orth 11201 [elephone Num SUB-TOTAL 384.48 64.80  TAL AMOUN sayment (compen	Auto Pro II  Auto	192.24 192.24 64.80 257.04